EXETER-WEST GREENWICH
REGIONAL SCHOOL DISTRICT
ATHLETIC HANDBOOK
2017-2018
PREFACE
This handbook provides the student-athlete and parents with the necessary information to make the athletic experience a rewarding one for all involved. This handbook adheres to the rules and regulations set forth by the Exeter-West Greenwich Regional School District and the Rhode Island Interscholastic League. Visit the following web site: www.rill.org Take time to familiarize yourself with these rules and regulations. Both student and parent must sign the Athletic Contract Form found on the last page of this handbook. Forms must be returned to the coach at the start of the season.

MISSION STATEMENT
Our athletic program plays an integral part of the educational environment for student-athletes at Exeter-West Greenwich Regional High School. Student-athletes gain life-long lessons from their participation in interscholastic athletics. Lessons in sportsmanship, teamwork, competition and learning how to win and lose gracefully are an integral part of the athletic experience. Our program plays an important part too in helping the individual student-athlete develop a healthy mind and body. Athletic competition adds to our school spirit and helps all students (spectators as well as participants) develop pride in their school and community.

The object of the athletic program is to provide every student opportunities for:

1. Physical, mental, and emotional growth and development;
2. Acquisition and development of specific skills in activities of each student's choice;
3. Team play with the development of loyalty, cooperation, fair play and other desirable social traits;
4. Experiences stressing self-discipline, self-motivation, self-control, excellence, how to overcome adversity and the ideals of good sportsmanship;
5. Provisions for worthy use of leisure time in later life, either as a participant or spectator.

HIERARCHY OF CONCERN
In an effort to address issues and concerns at the level closest to where they occur, they should be brought to the attention of responsible individuals in the following order;

Coach
Athletic Director
School Administrators (Assistant Principal and Principal)
Superintendent
School Committee
ELIGIBILITY
All student-athletes in Exeter-West Greenwich must meet the following academic requirements to be eligible to participate on an athletic team:

1. Have no more than one failing grade in the previous marking period.
2. A grade point average of 2.0 or above in the previous marking period. (Policy 8607)

(Note: Fall eligibility will be determined by utilizing the final marking period grades at the end of the previous school year. (Policy 8607)

In addition, all student-athletes in the Exeter-West Greenwich Athletic Program must comply with the policies set forth in this handbook and the eligibility rules of the Rhode Island Interscholastic League and RIPCOA.

DISCIPLINARY PROCEDURE
All school sponsored athletic events, whether practices or contests on school property or away are extensions of the education process and, as such, all rules of student behavior within classrooms shall equally apply to athletic events. Student-athletes must also adhere to the rules and regulations of the Exeter-West Greenwich Athletic Department and are subject to the following discipline procedures:

1. Team-Discipline – Team-Discipline is used in situations of minor discipline problems and is administered by the coach within the team framework. Examples of misbehavior that may lead to Team-Discipline are: late for practice, insubordination, horseplay, unsportsmanlike behavior, or profanity.

2. Player Ejection - Ejection from any Rhode Island Interscholastic League game (league or non-league) will incur game suspensions as determined by the RIIL, RIPCOA and athletic director. The principal and parents will be notified of any such suspension.

3. Suspension - Suspension is also used in situations of serious discipline problems. The suspended student-athlete will not be allowed to attend or participate in practices or contests during the period of suspension. The coach will notify the principal and parents of the suspension. Examples of suspension offenses are: insubordination, profanity, missed practices, hazing.

4. Removal - This is used in situations involving more serious discipline matters in which removal of the student-athlete from the team is in the best interest of the team and the school. The athletic director will notify the principal and parents of the removal. Examples are: continuation of any misbehavior identified above, in which the student-athlete received suspension; hazing, use of alcohol or other drugs; or involvement in criminal activity on or off school grounds.

An appeal of an athletic disciplinary action by a student or parent must be presented to the coach or other official who imposed the discipline; and, if not satisfactorily resolved, the appeal may be referred to the next higher authority in ascending order (see Hierarchy of Concern).
ALCOHOL AND DRUGS
Athletes perform best when they follow intelligent training rules that exclude the use of alcohol, drugs, and tobacco. Medical research confirms that the use of alcohol, tobacco, and any type of mood modifying substance produce harmful effects on the mind and body and impede athletic performance.

The purchase, consumption, possession, transportation or distribution of alcohol, other drugs, and/or any controlled substance(s) is unacceptable behavior for any student-athlete and will not be tolerated in the Exeter-West Greenwich Athletic Program. Therefore, any student athlete who is a first-time violator of School Committee Policy 8509: Managing Controlled Substances in the School Setting, and who is eligible for discipline other than suspension as outlined in Policy 8506: Suspension and Expulsion, shall be removed from the team for a period of 14 calendar days. Second-time violators and any first-time violators of Policy 8509 who do not meet the criteria for alternative discipline shall be removed from the team for the entirety of the season. Furthermore, the school discipline code for such offenses will also apply.

NO SMOKING POLICY
Studies have clearly demonstrated that the use of tobacco products and the exposure to second-hand smoke are serious, life-threatening health hazards. Rhode Island State Law prohibits the use of tobacco products on public school campuses. In order to provide a positive role model for good health habits, the Exeter-West Greenwich Regional School District uses all of its power and authority to insure that tobacco products are not used on any of its school campuses or any other location under the school district’s jurisdiction. Students are at all times prohibited from the use, possession, purchase, sale, or other transfer of tobacco products. This policy applies to all school and non-school events held on all school property, whether owned, leased, or rented, 24 hours per day, 7 days per week, by any person, student, employee, or guest of the school district. This policy also, without exception, applies to student-athletes at school sponsored events away.

First Offense: Student-athletes will incur a three-game suspension for violation of the "No Smoking Policy".

Second Offense: Student-athletes will be removed from the team for the remainder of the season.

ATHLETIC ATTENDANCE
Student-athletes are required to be at all practices and contests on time. Exceptions may include essential school obligations, sickness, or injury. Each coach will record practice and contest attendance.

1. Practice Days Requirement - The Rhode Island Interscholastic League requires all student-athletes to practice a specific number of days in each sport before participating in an athletic contest. Coaches will inform each student-athlete of practice requirements.
2. **School Vacation Period** - Student-athletes who miss practices and/or contests during the school vacation periods or time out for family obligations will be subject to the coach's rules, which will be provided to each student-athlete at the time of selection.

**SCHOOL ATTENDANCE**
Student-athletes are expected to be in school, on time, each school day. Exceptions include essential family commitments, sickness, or injury.

1. **School Absenteeism** - Student-athletes absent from school cannot attend or participate in any athletic activity on the day of the absence, unless they have been excused from a class or classes by school authorities (school administration) and have received clearance from the office to attend the athletic activity. The coach or team representative will pick up daily attendance sheets from the school each day prior to the game or practice.

2. **School Tardiness** - Student-athletes late for school must have a valid documented excuse for such tardiness to participate in an athletic practice or contest. The Principal of the building must approve this excuse.

3. **Physical Education Participation** - Student-athletes are required to participate in regularly scheduled physical education classes. Failure to participate will mean forfeit of athletic practice or games participation privileges for that school day.

**MEDICAL PROCEDURES (Policy 8608)**
All student-athletes in the athletic program must have passed a physical examination by a private physician at their own expense. Such examination is required for each year that the student-athlete participates in the athletic program. The State of Rhode Island School Physical Form, which can be obtained from the school office or the athletic department prior to the physical, must be used. A physical examination is valid throughout the school calendar year. (Examples: 8/28/12-8/27/13 or 11/5/12-11/4/13)

1. **Accident Report** - All injuries requiring medical attention must be reported to the Coach and Athletic Director. An Accident Report must be filed with the Athletic Director and the School Nurse Teacher within a 24-hour period (or next school day) if the student-athlete seeks or is given professional medical treatment. Reports of injury shall be forwarded to the Director of Administration by the Athletic Director for insurance purposes.

2. **Medical Reinstatement** - A physician's note is required before an injured or sick student-athlete will be allowed to return to practices or contests. The note must indicate the date when athletic participation may begin. Reinstatement notes must be processed through the athletic department and the School Nurse Teacher.
MEDICAL INSURANCE
The Athletic Director and Coaches shall use all precautions to prevent student-athletes from injury. However, there are risks involved with each sport, including severe injury. The Exeter-West Greenwich Regional School District is not responsible for medical bills resulting from injury while participating in athletics.

1. All student-athletes participating in athletics are required to have their own private medical insurance (Policy 8608)

2. All student-athletes also must purchase the Student Accident Insurance Plan before they can practice (Policy 8608). (Note: The Rhode Island Injury Fund monies may not be available unless the student-athlete enrolls in this insurance program.)

3. The cost to families for the Student Accident Insurance Plan shall be the same for all sports ($20 per athlete). The district will assume responsibility for the difference between the base price and the actual cost of the plan for football ($30 per athlete) (Policy 8608).

4. The Rhode Island Injury Fund Procedure:
   a. Private coverage must be used whenever it can be applied.
   b. The Student Accident Insurance Plan will, in most cases, pay part of the bill.
   c. The Rhode Island Injury Fund will consider any balance that may remain after the coverage of these agencies has been exhausted.
   d. Although the combination of these three resources will be sufficient to cover the cost of most injuries sustained by a student-athlete, the parent must assume the responsibility of any payment not covered.

TRANSPORTATION
All student-athletes will utilize the transportation provided by the school for travel to and from scheduled off-campus contests. Bus transportation shall be limited to EWG athletes and coaches. Although the Exeter-West Greenwich Regional School District uses all appropriate means to transport the student-athletes safely, the School District will not be liable for accidents (injury) or sickness resulting from these trips. (Policy 8604)

1. Although it is standard policy for all student-athletes to ride on the bus to and from off-campus contest, individual athletic coaches may allow students to ride home with their parents/guardians. Parents must be present at the contest and must notify the coach verbally and in writing when requesting that their child ride home with them.
2. Behavior standards, in effect for all students utilizing transportation services, will be strictly enforced.
3. Cleats of any type shall not to be worn on buses.

ATHLETIC CODE OF ETHICS
The development of sportsmanship is an important objective of the athletic program. This development is often stressed while the student-athlete is under the pressure of competition.
However, to cope with their pressure, student-athletes, parents and their coaches must contain negative emotional outbursts. Such expressions are unsportsmanlike and only serve to embarrass the team and the school district. It is important that all participants in the athletic program understand their responsibilities in this important area. All participants and stakeholders will adhere to the following code of ethics:

Student-Athletes will:
- Respect opponents, teammates, and coaches.
- Respect officials and accept their decisions without gesture or argument.
- Respect coaching decisions concerning the management of the team.
- Demonstrate fair play.
- Win without boasting (taunting), lose without excuses, and never quit.
- Always remember that it is a privilege to represent the school and community.

Athletic Coaches will:
- Comply with all requirements of the District Coaches Handbook. (Policy 6315)

Parents will:
- Respect coaching decisions concerning the management of the team and communicate with the coach when concerns arise.
- Encourage good sportsmanship by demonstrating positive support for all players, coaches, and officials at every game and practice.
- Place the emotional and physical well-being of their child ahead of any personal desire to win.
- Remember that the game is for the student-athlete—not for adults.
- Support coaches and officials with their child, in order to encourage a positive and enjoyable experience for all.
- Demand a sports environment for their child that is free from drugs, tobacco, alcohol, and refrain from their use at all practices and contests.
- Require their child to treat other players, coaches, fans and officials with respect regardless of race, sex, creed, or ability.

The Spectator will:
- Attempt to understand and be informed of the playing rules.
- Respect officials and accept their decisions without gesture or argument.
- Respect the judgment and strategy of the coach by not criticizing coaches or players.
- Show compassion for an injured player; applaud positive performance; will not heckle, jeer, or distract players; and avoid use of profane and obnoxious language.
- Appreciate a good play no matter who makes it.
- Respect the property of others and authority of those who administer the competition.
- Cooperate and respond positively to cheerleaders.
SELECTION PROCESS

In sports where safety of our student-athletes is paramount and manageability for proper instruction is required, the head coach may require a tryout for selection of team members. Where tryouts are necessary, the head coach will meet with prospective players prior to the start of the season. Tryout dates shall be posted and announced in advance. The coach will outline criteria for team selection with prospective players. There will be a minimum of two tryout sessions. To qualify for team selection, each and every student-athlete must participate in the tryouts. Exceptions will include injuries, current participation in an interscholastic league sport, and family emergencies. Academically ineligible students may participate in tryouts but shall not practice or play with the team during their ineligibility. Students who do not participate in or leave during the tryout period will not be eligible for team selection at any time subsequent to the tryouts.

The head coach will make selection of athletic teams on a year-to-year basis with consultation of appointed assistant coaches. When a student is not selected, the head coach will meet individually with that student to discuss why he/she was not selected and skills that the student can improve.

ATHLETIC AWARDS

Student-athletes shall successfully complete the athletic season to be eligible for an award (the season includes post season play). Student-athletes declared ineligible because of academic failure under Rhode Island Interscholastic League and school rules shall not be eligible for athletic awards of any type during the season in which they are academically ineligible. Previously ineligible who become academically eligible and join the team during the season will be eligible for an award if they successfully complete the season. The student-athlete shall make a contribution to the success of the team on the level that she/he is competing. Attendance at practices and games is an essential requirement. The respective coaches will identify any additional criteria.

ATHLETIC EQUIPMENT

Student-athletes are responsible for all individual and team equipment issued to them during the season. Student-athletes will be financially responsible for any damaged or missing equipment.

1. Student-athletic uniforms shall be worn at school sponsored events only, unless designated otherwise by the coach.
2. Student-athletes in possession of uniforms/equipment not officially issued to them will be subject to suspension and possible expulsion from the team.
3. All issued items will be returned to the head coach and the athletic department prior to the presentation of any award.
4. No athletic equipment will be issued to any student with an outstanding financial obligation for lost or damaged uniforms/equipment. Student-athletes who have not returned uniforms/equipment will be referred to school administrators.
5. Coaches will instruct their team members on the proper use and care of equipment. Student-athletes will be required to inspect their equipment on a daily basis and notify the coach immediately of any equipment problems.

6. Coaches shall ensure that uniforms are cleaned before every contest and when the student-athlete has completed their season.

7. Coaches shall ensure that cleats are not to be worn in school buildings and on school buses.

8. Student-athletes will keep the locker area clean both at home and away.

EXETER-WEST GREENWICH REGIONAL SCHOOL DISTRICT

CONSENT TO PARTICIPATION AND ACKNOWLEDGMENT OF RISKS AND RULES CONTRACT FORM

I/We hereby acknowledge that participation in interscholastic athletics involves a risk of injury, which may include severe injuries possibly involving paralysis, permanent mental disability, or death, and that these injuries may occur in some instances as a result of unavoidable accidents.

I/We have read, understand, and am/are willing to abide by the rules and regulations of the Exeter/West Greenwich Athletic Program and the Rhode Island Interscholastic League.

Athlete’s Full Name (print) Date of Birth (print)

Athlete’s Signature Date

Parent/Guardian’s Signature Date

Parent/Guardian’s Signature Date
CUMULATIVE EFFECTS OF REPEATED CONCUSSIONS

A three-year, follow-up study shows that athletes having a previous history of at least one concussion are at an increased risk for further concussions. As the number of concussions increase, so do the risk for future injuries (Guskiewicz et al, 2003). It has also been shown that repeated concussions have been linked to longer recovery periods. Highlighting the importance of making sure athletes are symptom free prior to returning to competition from a previous MHI, research has shown that 1 in 15 athletes with a concussion have recurring concussions within 7-10 days from the first concussion. Because of these findings and the potential for complications resulting from MHI, it is recommended that athletes sustaining more than one concussion should be referred for follow-up evaluation and assessment to determine any residual effects that might preclude participation in contact or collision sports. Cases of individuals suffering permanent brain damage from multiple concussions have been reported but no consensus on how many concussions are too many or what leads to that permanent damage.

MEDICAL CLEARANCE TO RETURN TO PARTICIPATION AFTER HEAD INJURY

There is unanimous agreement within the medical community that NO athlete who has signs and symptoms of post concussion should be returned to action. There is also unanimity that there is increased risk of significant damage from a concussion for a period of time after a preceding concussion and from cumulative damage of multiple head injuries. The more concussions an individual has, the greater is the risk of having additional concussions. The exact period of increased vulnerability or the number of concussions that is “too many” has not been determined. Traditionally, physicians have advised athletes not to return to action until they have been free of symptoms for a minimum of a week. (McCrea et al, 2003). Now, rather that discuss a length of time to be free of symptoms, guidelines suggest using the gradual return-to-play protocol shown above while monitoring the athlete for symptoms. This could be longer or shorter than a week. Research, utilizing some of the testing instruments mentioned above, is now revealing subtle residual effects of concussion not found by traditional evaluation. These identifiable deficits frequently persist after the obvious signs of concussion are gone and appear to have relevance to whether an athlete can return to action with relative safety.

Source: National Federation of State High School Associations
Endorsed by the RI Interscholastic League Sports Medicine Advisory Comm.

School & Youth Programs
Concussion Act
Title 16-91

Findings of fact—The Rhode Island General Assembly hereby finds and declares:

1. Concussions are one of the most commonly reported injuries in children and adolescents who participate in sports and recreational activities. A concussion is cause by a blow or motion to the head or body that causes the brain to move rapidly inside the skull. The risk of catastrophic injuries or death is significant when a concussion or head injury is not properly evaluated and managed.

2. Concussions are a type of brain injury that can range from mild to severe and can disrupt the way the brain normally works. Concussions can occur in any organized or unorganized sport or recreational activity and can result from a fall or from players colliding with each other, the ground, or with obstacles. Concussions occur with or without loss of consciousness, but the vast majority occurs without loss of consciousness.

3. Continuing to play with a concussion or symptoms of a head injury leaves the young athlete especially vulnerable to greater injury and even death. The general assembly also recognizes that, despite having generally recognized return to play standards for concussion and head injury, some affected youth athletes are prematurely returned to play resulting in actual or potential physical injury or death to youth athletes in the State of Rhode Island.

4. Concussions can occur in any sport or recreational activity. All coaches, parents, and athletes shall be advised of the signs and symptoms of concussions as well as the protocol for treatment.

In response to these findings schools are required to educate and inform parents and athletes and of the Nature & Risk of concussions and head injury including issues related to the continuation of play after a suspected concussion or head injury. Furthermore, an athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition. In addition, the athlete may not return to play until he/she is evaluated by a licensed physician and until the athlete receives written clearance to return to play from that licensed physician.

This information sheet must be reviewed, signed by all athletes and their parents and/or guardian and returned to the school at the beginning of each sport season and prior to the youth’s return to practice or competition.

The law also requires the following:

- Any athlete who is suspected of sustaining a concussion or head injury during practice or a game shall be removed from practice or game.

For more information please visit the RII website (www.rii.org)

Parent/Guardian ____________________________
Athlete ____________________________
Sport ____________________________
School ____________________________
I have reviewed the contents of this pamphlet with my son/daughter.

Parent Signature ____________________________ Athlete Signature ____________________________
Date Signed ____________________________
Complications Associated with Concussions

POST-CONCUSSION SYNDROME
Following a concussion, athletes may suffer a number of lingering symptoms for varying lengths of time. Below are listed some of the more common symptoms that may last for weeks or months. Again, no athlete with any symptom related to head injury should even begin the return-to-play protocol.

- Impaired attention
- Concentration and memory deficits
- Dizziness
- Tinnitus (ringing in the ears)
- Prolonged or recurring headaches (especially with exertion)*
- Fatigue
- Irritability
- Visual problems
- Neuroasthenia, weakness or numbness

*Often high school athletes may return to sport prematurely because the headache can mistakenly be seen as a common ailment. However, recent research has shown that athletes with residual headaches even a week post concussion do poorly on specialized tests such as reaction time and memory (Collins et al, 2003). It is imperative that even a seemingly non-significant headache not be dismissed as a common ailment prior to returning to sports.

SECOND-IMPACT SYNDROME
Second-impact syndrome is a rare event, which poses a significant concern for athletes who return too soon after suffering a previous concussion. Second-impact syndrome occurs when a second concussion occurs before a previous concussion has completely healed even if both of the injuries were very mild. Second-impact syndrome is characterized by an autoregulatory dysfunction that causes rapid and fatal brain swelling, and can result in death in as little as two to five minutes (McCrory, 1998). It is particularly important to note that virtually all of the second-impact syndrome cases that have been reported have occurred in adolescent athletes. The signs of second-impact syndrome are as follows:

- Previous history of concussion
- Visual, motor or sensory changes
- Difficulty with memory and/or thought process
- Collapse into coma
- Neurological abnormalities in strength, range of motion or sensory feelings.
Concussions

More on Concussions

SIGNIFICANCE
The initial recognition and management of concussions are particularly important in high school athletes in preventing two potential complications associated with concussions in this age group: post-concussion syndrome and second-impact syndrome. Younger athletes may be at increased risk of cerebral swelling after a mild head injury with greater vulnerability for post-concussion symptoms for a longer period of time. Proper management should minimize the risk for these catastrophic results.

RECOGNITION OF CONCUSSIONS

Severity
The severity or seriousness of a concussion is primarily based on how long the symptoms last. The number and severity of symptoms may have some correlation but no specific symptoms are more likely to help determine severity. Restricting mental and physical activity immediately after the concussion seems to correlate with a quicker return to play.

Signs and Symptoms of Concussions
Coaches, administrators, officials (see Table 10 below) parents and athletes need to be aware of the observable signs and reported symptoms of a concussion.

Table 10. Signs and Symptoms of Concussions

<table>
<thead>
<tr>
<th>Player observed by medical staff</th>
<th>Symptoms reported by athlete</th>
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<tbody>
<tr>
<td>Player appears dazed</td>
<td>Headache</td>
</tr>
<tr>
<td>Player has vacant facial expression</td>
<td>Nausea</td>
</tr>
<tr>
<td>Confusion about assignment</td>
<td>Balance problems or dizziness</td>
</tr>
<tr>
<td>Athlete forgets plays</td>
<td>Double or fuzzy vision</td>
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<tr>
<td>Disorientation to game, score, opposing team</td>
<td>Sensitivity to light or noise</td>
</tr>
<tr>
<td>Inappropriate emotional reaction</td>
<td>Feeling slowed down</td>
</tr>
<tr>
<td>(laughing, crying)</td>
<td>Feeling &quot;foggy&quot; or not sharp</td>
</tr>
<tr>
<td>Player displays incoordination or clumsiness</td>
<td>Change in sleep pattern</td>
</tr>
<tr>
<td>Player is slow to answer questions</td>
<td>Concentration or memory problems</td>
</tr>
<tr>
<td>Loss of consciousness</td>
<td>Irritability</td>
</tr>
<tr>
<td>Repeating the same questions or comments over and over again</td>
<td>Sadness</td>
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<tr>
<td></td>
<td>Feeling more emotional</td>
</tr>
</tbody>
</table>

Concussions
National Federation of State High School Associations

- Even though most concussions are mild, all concussions are potentially serious and may result in complications that range from prolonged brain damage to death if not managed properly.
- An athlete who has a head injury should not return to play without evaluation by medical personnel.
- Do not allow any athlete to return to participation if he/she has any symptoms.
- If an apparent head injury occurs, even if uncertainty exists about the severity of the injury and whether a true concussion occurred, that athlete should not return to action until medical clearance is obtained.
- Even a seemingly minor head injury, often referred to as “a ding” or “bell ringer,” is now considered a true concussion and must be managed as such to avoid potential long-term consequences.
- Neither loss of consciousness, vomiting or amnesia is necessary for a head injury to be considered a concussion.

RECOGNITION

A concussion, by definition, means "to shake violently." A blow to the head that causes the brain to shake inside the skull and result in EVEN A BRIEF AND MILD alteration in brain function is considered a concussion. Although no obvious signs or symptoms may show up immediately, listed below are some of the symptoms that may suggest a concussion has occurred. Any of these

- Headache
- Dazed and vacant expression ("foggy")
- Confusion
- Difficulty with balance and coordination skills
- Difficulty with concentration, memory and organizational skills
- Nausea and/or vomiting
- Amnesia
- Slurred and/or inappropriate speech
- Repeating the same questions or comments
- Apparent loss of consciousness
- Moves slowly and/or clumsily
- Unsure of game, score or opponent
- Forgets play responsibilities
- Double vision or blurred vision
- Increased sensitivity to light or noise
- Sleep difficulties
- Increased irritability
- Hypersensitivity to light and noise
- Abnormal vision, hearing, smell and/or taste
- Excessive fatigue
- Abnormal sleep patterns
- Ringing in the ears
- Numminess and tinnitus
- Emotional problems, especially sadness and depression
Concussions

National Federation of State High School Associations

Returning the Athlete to Participation

The International Conference on Concussion at Vienna (2001) and Prague (2004), have significantly changed the thinking of proper management of head injuries in athletes. Some of the conclusions are highlighted below:

- The grading systems for concussions previously utilized are no longer considered useful in determining how serious an injury may be or in determining when an athlete can safely return to play. No symptom(s) or signs (including loss of consciousness or amnesia) accurately predict the severity of the injury or help decide when an athlete can return to play.
- New guidelines recommend monitoring the course of the symptoms and beginning a gradual return-to-play protocol when all symptoms have cleared. (See Table 8—Sideline Decision-making and Table 9—Return-to-play below)
- There are now objective, validated methods of evaluating brain function in athletes to help physicians determine with greater confidence when an athlete does seem to be clear of symptoms and can start through the graduated return-to-play regimen. These include questionnaires, various pencil-and-paper tests, balance tests, neurological and memory tasks, and computerized tests. Recognizing that athletes, with the mentality of "playing through the pain," are not always totally candid about admitting symptoms, guidelines now recommend the use of these more objective methods to evaluate how an athlete's brain is functioning. Tests requiring little cost like Sideline Assessment of Concussion (SAC), Sideline Concussion Checklist (SCC), and Sport Concussion Assessment Tool (SCAT) have been shown to be helpful. Newer computerized neuro-psychological screening like impact, CRI, and Sentinel have also been shown to be helpful for physicians making return-to-play decisions.
- Guidelines further suggest that athletes playing high-risk or collision sports or with a history of previous concussions, should have these tests administered prior to the season to serve as a baseline in case an injury does occur.
- Mental exertion appears to worsen and prolong concussion symptoms to the same degree as physical exertion. Therefore, the concept of "cognitive rest" should be adhered to in concussion management. This may involve a limited class schedule for several days following a concussion, or rescheduling tests. More severely concussed athletes may require more detailed and long-lasting special accommodations.
- A requirement to begin the return-to-play protocol is that the athlete must have no symptoms. Then, gradual increase in mental activity as tolerated will be followed by a similar gradual return to full physical activity. If symptoms recur, then the athlete must regress to a previous level of performance. (See Tables 8 and 9 below)

### Table 8. Sideline Decision-making

<table>
<thead>
<tr>
<th>Sideline Decision-making</th>
<th>Medical Clearance RTP Protocol</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. No athlete should return to play (RTP) after head injury even if clear in 15 minutes without medical clearance.</td>
<td>1. No exertional activity until asymptomatic.</td>
</tr>
<tr>
<td>2. Any athlete removed from play for a head injury must have appropriate medical clearance before practice or competition may resume.</td>
<td>2. When the athlete appears clear, begin low-impact activity such as walking, stationary bike, etc.</td>
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<tr>
<td>3. Close observation of athlete should continue for a few hours.</td>
<td>3. Initiate aerobic activity fundamental to specific sport such as skating, running, etc.</td>
</tr>
<tr>
<td>4. After medical clearance, RTP should follow a stepwise protocol with provisions for delayed RTP based on return of any signs or symptoms.</td>
<td>4. Begin non-contact skill drills specific to sport such as dribbling, ground balls, batting, etc.</td>
</tr>
<tr>
<td></td>
<td>5. Then full contact in practice setting.</td>
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<tr>
<td></td>
<td>6. If athlete remains without symptoms, he or she may return to play.</td>
</tr>
</tbody>
</table>

A. Athlete must remain asymptomatic to progress to the next level.
B. If symptoms recur, athlete must return to previous level.
C. Medical check should occur before contact.

### Table 9. Return-to-play

<table>
<thead>
<tr>
<th>Return-to-play Medical Clearance Protocol</th>
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<tbody>
<tr>
<td>No mental or physical activity should occur until athlete's symptoms are gone. Avoid physical exertion but also avoid studying, school attendance, test taking, video games, computer use and TV until clear.</td>
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<tr>
<td>When clear, begin with short periods of reading, focusing and an abbreviated school day as tolerated.</td>
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<tr>
<td>When tolerating full day of school attendance, begin low-impact activity such as walking, stationary bike, etc. Gradually increase intensity and duration as tolerated.</td>
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<tr>
<td>Advance to aerobic activity fundamental to specific sport such as skating, running, etc.</td>
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<tr>
<td>Advance to non-contact skill drills sports specific such as dribbling, batting, shooting.</td>
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<tr>
<td>Full contact in practice setting.</td>
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<tr>
<td>If accomplishes all the above without return of signs and symptoms, may return to play following final clearance. Some athletes, especially if multiple previous concussions, should consider having a base-line computerized neuropsychological test performed because of the increased risk of concussions in those with previous ones.</td>
</tr>
</tbody>
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